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COURSE OF STUDY SERIES

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HEALTH EDUCATION For Kindergarten and Grades 1 to 4

Approved by the Superintendent's Council May 10, 1922, for temporary use—to be observed and criticized by all who use it, and revised for printing at the end of the year.

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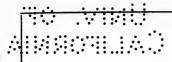
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OAKLAND PUBLIC SCHOOLS
OAKLAND, CALIFORNIA

04A3



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In practically no field of pedagogy has there been more complete revision of method during the past few years than in the field of health education. This preliminary report is presented in the hope that it will stimulate further experimentation and contribute material which will be suggestive for further development and revision of this outline.

Appreciation is due the Child Health Organization of America, the United States Bureau of Education, and many cities which have so generously cooperated in submitting programs, and those teachers of the Oakland Public Schools who have been a continued source of helpfulness to the committee.

Respectfully submitted,
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HEALTH EDUCATION FOR KINDERGARTEN AND GRADES 1 TO 4

A COURSE of study is constructed to serve as a helpful guide in the hands of teachers. It should encourage initiative and resourcefulness and inspire the teacher to his or her best thinking. The plan adopted for Oakland Public Schools is to have the courses of study originate from the practices of the classroom through the medium of committees composed largely of classroom teachers. These committees are instructed to weigh carefully modern educational practices and educational literature on the subject, to counsel with specialists and laymen, and to consider the educational, social, moral, and psychological reasons for including the material which they propose in the courses of study.

Our educational program in the elementary schools, junior high schools, and high schools should be sufficiently flexible to meet the needs, not only of those of normal capacity, but should interest those who need more to do, and should adjust for those who cannot keep the regular pace.

The courses of study proposed, therefore, will provide for variation (a) in content, (b) in time required, and shall be planned to meet the needs of at least three groups—the superior, the normal, and the retarded.

NOTE—Teachers are asked to report at the end of the year (1) those sections of this course of study which they deem most suitable for each one of the grades concerned; (2) those standards of attainments most directly applicable to each grade concerned.

- A. PURPOSE—The purpose of health teaching is to conserve and to promote the health of childhood by:
 - Creating a desire for health which expresses itself in daily habits cheerfully performed.
 - Stating health in positive terms: "the source of strength, beauty, joy";
 "a state of overflowing vigor"; "abundance of life"; not as a mere freedom from disease.
 - 3. Giving the knowledge which is essential to healthy living.
- B. SUBJECT-MATTER—The needs of the growing child:
 - Foods for the growing child. Encourage use of: Milk—at least a pint a day. Vegetables—especially green, leafy varieties. Fruits. Well-cooked cereals.
 - 2. Care of the teeth. Encourage the use of a small toothbrush with "up-and-down" strokes, morning and night. Suggest use of precipitated chalk or good white soap where dentifrice can not be afforded. Have individual brush. Keep well sunned or dried, and in individual receptacles.

 - 4. Fresh air. Recommend out-of-door play. Open windows day and night.

5. : Cleanliness. Stimulate child to:

Come to school clean.

.... Wash hands before eating.

Battle frequently; more than once a week.

Carry a clean handkerchief, and use it properly.

Carry a clean handkerchief, and use it properly. Keep objects (pencils, books, fingers, etc.) out of mouth.

Good Posture. Emphasize importance of good sitting and standing posi-tion. Growing bones are more pliable than they will be later. Sitting-Chest up, chin in, head up, knees straight ahead, end of spine against back of chair.

Standing-Chest up, chin in, waist flat, weight on balls of feet.

Protection of eves. Teach children to avoid strong or insufficient light 7. while reading. Keep fingers away from eyes and observe position of book and distance from the eyes. When the child is sitting in correct posture the book should be at least:

10 inches from the eyes—Primary.
12 inches from the eyes—Intermediate.
14 inches from the eyes—Grammar. 16-20 inches from the eyes—Adult.

METHODS: C.

General Methods. 1.

- Appeal to the dramatic instincts of the child. Personify health fac-Give them life and reality; for example, let the toothbrush become "King of Brushes"; soap, the "Guardian of Fairy Health's House"; "Late Hours", the thief who steals roses from children's cheeks; milk, the "Master Carpenter", etc. Use health plays frequently and dramatize any health stories which the children may write. Songs, rhymes, jingles, or other rhythmic activities add life to health teaching.
- Utilize creative abilities. Make a map of healthland on the sand-table, with "Bathtubville," "Orange Valley," "East and West Tooth-brush," "Sleepy Hollow," "Milk Depot," etc., as points of interest. Encourage the children to suggest other names for mountains, cities, or towns.

Let scrapbooks be made with cut-outs from advertising sections of magazines to illustrate a given subject: "Foods for Health," "My Clean-up Book," "Out-of-door Play," etc. When appropriate pictures can not be found, children may supplement with their own drawings. The entire scrapbook can be made up of original drawings if desired. Another variation is the class scrapbook representing the entire group of health habits, to which all children bring contributions.

Make the practice of health habits an enjoyable game. Refer to habits as the "rules of the game," or make each habit a game in itself.

> "He thinks the tub a sea or bay, And makes a storm of soapy spray, And when the tempest has blown past He jumps out on dry land at last. He saves the sail from out the wreck. It is the towel on his back.'

Special Methods.

NOTE-Health teaching in the kindergarten and grades 1-4 can best be given, not as an individual subject, but by the natural, reasonable application of facts and principles to healthful living in situations offering such possibilities. Should such applications, however, be forced, they become artificial and useless.

The following offer special opportunities for health-teaching:

a. Inspection.

b. Weighing and measuring.

c. Physical Education.

d. Language.e. Drawing.

f. Civics and Service.

g. Geography.h. Penmanship.i. Industrial arts.

Curriculum Committees working on courses of study have already made provision for health teaching in Physical Education, Language, Drawing, Civics, and Geography.

a. The Inspection Period. Use the morning inspection for a daily checking-up of those health habits for which the child should be held responsible, irrespective of family conditions and standards. The inspection should be:

Pleasurable, not painful. Encouraging, not discouraging. Interesting, not monotonous.

Vital part of health-teaching, not an unrelated activity.

Suggested questions:

Are hands clean? Face? Nails?
Is hair clean, brushed, and well-cared for?
Has toothbrush been used?
Has the child a clean handkerchief?
Are rubbers and overcoats removed?
Are feet dry?

Suggestions for stimulating and using results:

- (1) The automobile race: picture a race by drawings across top of blackboard, or models hung on wires. Let machines be numbered according to the rows and move ahead as rapidly as all members of the row show clean hands, teeth, hair, etc. Special recognition may be given the winning row, if desired.
- (2) Picture a class race by figure drawings (single-line action figures). Piace initial under each figure. Move figure foward as improvement appears. Race may be for perfection in any phase of physical care. Inter-class competition may be included.
- (3) Personify toothbrush and the dirty tooth by adding legs, arms, and faces. Represent in running position, the tooth pursued by toothbrush. Cut from stiff paper and mount at top of blackboard. Place dirty tooth as many inches or feet from the door as there are children in the room. Move dirty teeth nearer the door every time a clean set of teeth appears. Eliminate entirely when the class unanimously shows evidence of the use of the toothbrush. The toothbrush and tooth may be replaced by soap and dirty hands, wash-cloth and ear, or other personifications of habits under inspection.
- (4) Build a flag with stars representing clean hands, white stripes representing clean teeth, red stripes representing clean handker-chiefs, etc. When the flag is completed, it stands for a healthy nation which the class is helping to build.
- (5) Build a house for "Fairy Health," letting various health habits represent bricks, windows, and shingles, respectively. As habits function successfully, the house takes form, either with chalk or the blackboard or with bits of colored paper pasted to some firm foundation.

- (6) Demonstrate with dolls or models best methods of brushing teeth, caring for hair, etc.
- b. Weighing and Measuring.

Why should we weigh children in school?

- (1) Weight in relation to height and age is one of the best indices a teacher may obtain of the health of her classes.
- (2) Children are eager to know what they weigh, what they should weigh, and if they are gaining. This enthusiasm and the question "What shall I do to gain?" provide an easy approach to teaching the "rules of the game."
- (3) Measurable results of rest, milk drinking, regular eating of wholesome foods, and other health habits can be seen in increased weight and height. Evidence of this kind is inspiring to the child who has gained, and to the class as a whole.

When should we weigh?

- (1) All children would profit by regular monthly weighing.
- (2) Weigh at same time of day each month. Weights will vary according to meals, mid-morning lunch, eliminations, etc.

(3) Underweight children may be stimulated to gain by more frequent weighing.

How to weigh?

- (1) In the spirit of the game; make the weighing time a "real event."

 Prepare for it, arouse interest in it, link it up with health-teaching.
- (2) When age permits, encourage children to weigh themselves.

What should we weigh?

Weigh the child, not his shoes, sweater, coat, or heavy objects in his pockets. The tables of average weights for height and age were made on basis of weights taken in light indoor clothing, hence in weighing conditions should be as nearly identical as possible. Avoid embarrassment by announcing previously that shoes will be removed and hosiery should be in order.

How to use results?

- (1) Charts and graphs might be made in grades 3 and 4.
- (2) Reasons may be analyzed for gains made, and noteworthy progress praised.
- (3) Cooperation of nurses for children needing special attention may be secured.
- c. Correlation of Drawing and Health Education.
 - (1) Drawing as a language.

Use Drawing as a language. Establish habits of health by means of motor activities. As soon as the beginners have learned to represent action-figures and rooms as outlined in the course of study in Drawing for the first grade, the health program suggests many themes for illustration.

(2) Themes.

- (a) "This is the way we brush our teeth," or "comb our hair," or "take a bath" can be represented with even the meagre graphic vocabulary of beginners so that drawings need not even be labeled.
- (b) Draw simplified outline of a bathroom with the stick figures performing the activities suggested to carry over health instruction given by teacher.
- (c) The dining room suggests an action figure drinking milk or eating fruit, etc.
- (d) Associate the kitchen with the idea of preparing vegetables.

- (e) Represent sleeping with windows open by drawing curtains in the bedroom at an angle to suggest the force of the breeze against the hangings. Show the hour of retiring by face of clock with hands at proper place.
- (f) In the high first grade, when the pupils learn to clothe the little stick figures, Wee Willie Winkle's costume makes a fine model for a type of simplified clothing and also offers an opportunity for Wee Willie to admonish his little friends to retire early. (See "Metropolitan Mother Goose.")
- (g) As the child's graphic vocabulary expands in the second and third grades, and he becomes more proficient in the representation of figures and more complex action, and his ideas of form take more definite shape, elaborate and supplement themes suggested for the first grade. The papers may be bound in booklet form under some simple attractive cover title, as "Better Boys and Girls."
- (h) The delightful adaptations from Mother Goose rhymes furnish interesting inspirations for illustrations and also stimulate children to make similar ones. The joy of having one's original verses illustrated by the whole class has fascinated many pupils.
- (i) The value of fresh air and exercising in the open is another favorite type among boys and girls and one that has brought forth many interesting and original illustrations.
- (j) Represent gain in weight graphically by pictures of children suggesting marked contrast in physique and labeled "Before and After Drinking Milk." The same theme has been depicted by see-saws with husky looking milk drinkers, overbalancing dangerously lean undernourished figures.
- (k) In the fourth grade, when elementary lettering is taught, vitalize health teaching by originating health slogans. To add to the attractiveness of the poster, cut colored pictures from magazines. At the same time work out problems in page arrangements, margins, etc.
- (1) For lessons in object drawing select models suggestive of health education. A milk bottle, a coffee can, or tea pot with appropriate slogans, groups of fruits, or vegetables, cereal bowls, etc. may be used to advantage and will probably suggest similar models.
- (m) Interest in telling something is the motive which inspires all good drawing. Judging from the many original illustrations of subjects suggested by health education, the topic evidently appeals to the children and is heartily recommended to primary teachers who are searching for a real live worthwhile project.
- (n) Booklets and drawings finding their way into the foreign home supply a picture language understood by all.
- d. Correlation of Physical Education and Health Education. Physical Education is responsible not alone for physical development through activity, but for achievement so far as possible of perfect physical condition. Stimulate every child to include in his daily program the health habits which in the past the physical director has demanded in developing selected athletes.
 - The following methods are suggested for use in this period: The "Teaching of Efficient Living" in the course of study in Physical Education assigns a definite place for the follow-up of morning inspection and the teaching of health habits. An average of one Physical Education period per week may be devoted to this type of instruction.

The following methods are suggested for the use in this period:

- (1) Weighing and measuring.
- (2) Health plays and dramatizations (alphabet, slogans, puppet, etc.) See bibliography, p. 19.
- (3) Drills (posture).
- (4) Games (invented or adapted from tag, singing, or indoor games).

 Examples:
 - (a) Tag Game.—The Sandman (Grades 1 to 2.)

 One player is the Sandman and the others children. The Sandman may catch the children only after seven o'clock. The game starts with the Sandman in his cave marked in one corner of the playground, and the children in their home marked in the diagonally opposite corner. The Sandman leaves his cave and wanders about, whereupon the children also come out and scatter about, approaching as close to the Sandman as they dare. They keep asking him "What time is it?" and he answers any hour he chooses. Should he say "One o'clock" or any other hour through six o'clock they are safe, but should he say "Seven o'clock" the children must run home to bed, the Sandman chasing them. Any child caught changes places with the Sandman and the game is repeated.
 - (b) Indoor game.-Food Target Game (Grades 3 and 4.)

Following a discussion on values of foods, a breakfast might be planned (or luncheon or dinner) and diagrammed on large circle on wall or blackboard. Each row in the classroom forms a team. One member of each team in turn stands across room and throws a soft ball (or feathered dart with pin point) at target. When all have thrown, the row wins which has scored the best balanced meal. The same scheme could be used for health habits, i. e. divide circle into segments to include active play every day, long hours of sleep, fresh air day and night, drinking of milk and pure water daily, brushing teeth, etc. Team wins which has scored largest range of health habits.

(c) Singing Games.

Words suggested by children to air of "Mulberry Bush"; for example:

"This is the way we brush our teeth"
"This is the way we drink our milk", etc.

- e. Correlation of Penmanship and Health Education.
 - (1) Posture.

Use the writing desk, the pen and the paper to work out the best posture for every child. Since good posture is 90 per cent of good writing, take advantage of associating the earliest writing habits of the child with the correct sitting posture.

"Let us play that the spine is a train of cars. When we sit up straight, each car will be on the track and all the doors and windows will be wide open to let the pure air in; but if our backs are bent and twisted, some of the cars will fall off the track and the windows (lungs) will close, shutting out all the fresh air."—Spencer.

A high chest, a straight back, and arms well up on the desk promote better penmanship and better health.

(2) Health Slogans and Speed Drills.

(a) Health Slogans.—At first the focus of attention is necessarily on posture, the visualization of the letter, and the motor activity which produces it, but soon the word as a whole is visualized and later the sentence. When this stage is reached sentences may be selected which express health ideas as well as provide for practice in the principles of writing. Children may also be encouraged to originate sentences expressing ideas from the letter forms which have been taught.

Use of Capital O:

One, two, milk's good for you. Oranges sweet aid rosy cheeks. Open windows while we sleep.

Use of O and A:

Our teeth we brush each morn and night And keep them always clean and bright. Out-of-doors we play each day And keep healthy, strong, and gay.

(b) Speed drills.—When speed is being developed in the fourth grade and memorizing the assigned copy is part of the drill, attractive health slogans and messages might often replace some of the standard selections.

(See Educational Tests and Measurements-Monroe, De Voss, and Kelly, page 186.)

f. Correlation of Language and Health Education.

(1) Reading.

Develop your own primer by printing sentences on strips of paper. Base contents on experiences of child and emphasize health factors of a child's day. Reading lessons on health themes are more logical and beneficial than the disjointed contents of many primers. Include health stories as supplementary readers when child is able to master them.

(2) Story-telling.

Develop a succession of stories which make the same appeal quietly but forcibly. Do not destroy pleasure in the story by over-emphasis on its lesson. Primary object of the story—to give pleasure; secondary object—to develop proper habits of living.

Use any story which includes a health appeal, e.g., "The Crow" (Kindergarten Stories and Morning Talks, Sarah E. Wiltse). Effort of the crow in obtaining water suggests effort children should make to develop habits of cleanliness, water-drinking, etc. "How many crows have we this morning?" might well introduce morning inspection on the following day. (See bibliography for list of stories with health appeal as major theme.)

(3) Conversation.

Encourage children to bring in pictures with health themes for basis of oral composition. Advertising sections of magazines furnish a wealth of material for stimulating conversation on use of fruits, vegetables, cereals, the toothbrush, etc.

- g. Correlation of Civics and Health Education.
 - (1) Emphasize the health of the school, home, and community and the obligation of the pupil in relation to these social interests. The child is not interested generally in his own health, nor should he be except as he realizes that "to be well and strong" enables him to do something for the general good—service to playmates, school, community. "Health is important not as an end unto itself but as a means to practically all worthy ends of life."
 - (2) Outline what services the community provides for the health of its members.
 - (3) Arouse interest and support for school health activities. (See Course of Study in Civics—Grades 1 to 6.)

h. Correlation of Geography and Health Education.

- (1) Use child's surroundings for his laboratory. In visits to markets utilize opportunities for stressing fruits and vegetables. Classify:
 (a) those which grow in surrounding territory; (b) those which come from other regions. Suggest needs for growing plants; sunshine, water, food, and air.
- (2) Point out problems of cleanliness in handling and preparing food. Bakeries suggest many problems for class discussions: wrapped bread, personal habits of employees, brown bread vs. white bread, etc.
- (3) Use topic of "Shelter" for introducing problems of home hygiene.
- i. Correlation of Industrial Arts and Health Education.
 - (1) Adapt paper cutting and use of stencils to such themes as:
 - (a) My Fruit Basket.
 - (b) The Friends of Rosy Cheeks (vegetables cut from colored paper).
 - (c) Before and After I Drank Milk (see Health Education Bulletin, No. 10, Bureau of Education, Washington, D. C.).
 - (d) Victory of the Milk Bottle (milk bottle personified eliminates the coffee pot).
 - (e) The King of Brushes (personified toothbrush with crown or other designating mark of prominence).
 - (2) Modeling.—Map of Healthland (for details see "The Healthland Flyer," Child Health Organization of America).

D. STANDARDS OF ATTAINMENT:

NOTE: It is understood that the following habits are to be stressed continuously by each teacher from the kindergarten through the fourth grade, so that by the end of the fourth grade they will be firmly established in the life of the child.

1. Habits.

a. To come to school with clean hands, face, and body.

b. To wash hands before eating.

- c. To have a clean handkerchief and use it properly.
- d. To keep objects out of mouth (fingers, books, pencils, etc.).

e. To brush teeth daily.

f. To stand, sit, and walk in good positions.

g. To desire fresh air.

- (1) Out-of-door play.
- (2) Fresh air in sleeping rooms.

h. To be in bed by eight o'clock.

i. To avoid sunlight on book while reading; to keep fingers from eyes.

2.

Knowledge.
a. Common foods and beverages, both good and harmful, for children 6-11 years of age.

Hours of sleep needed for children 6-11 years of age.

Method of brushing teeth and caring for toothbrush. Value of visiting dentist at least once a year.

d. Average weight for individual height and age.

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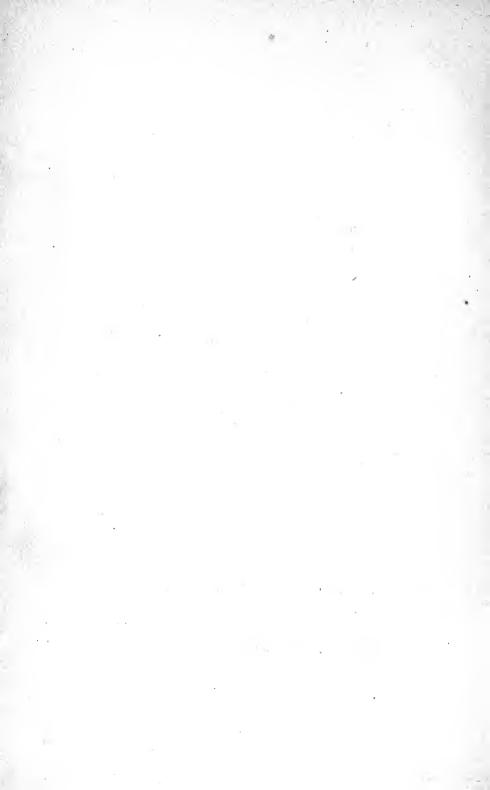
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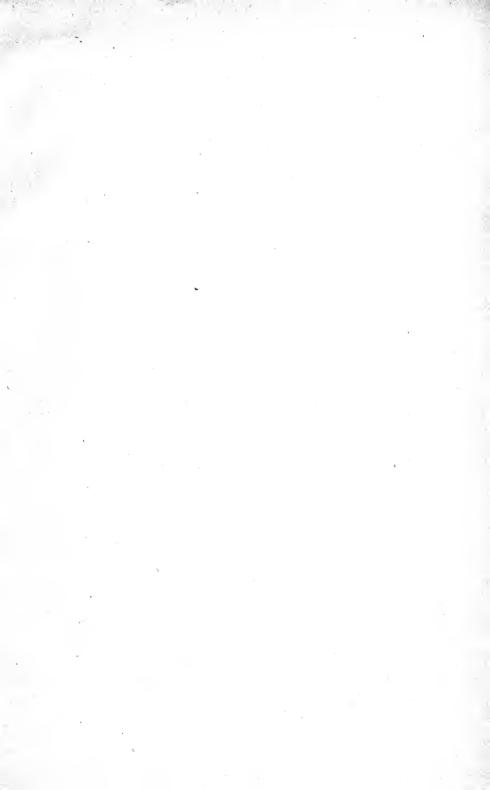
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- 5. Teaching Health.
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